FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



FORM D

THOMSON FINANCIAL NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION



Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Private Placement of Limited Partnership Interests of PETRUS FUND PLUS, L.P.	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE	
Type of Filing: New Filing X Amendment	_
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) PETRUS FUND PLUS L.P.	
Address of Executive Offices (No. and Street, City, State, Zip Code) Telephone Number (Including A 2300 West Plano Parkway, Plano, Texas 75075 (972) 535-1900	Area Code)
Address of Principal Business Operations (No. and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)	
Brief Description of Business	
Investment Partnership	
Type of Business Organization	
□ corporation □ limited partnership, already formed □ o	other (please specify):
business trust	
Actual or Estimated Date of Incorporation or Organization: Month Year	☐ Estimated
CN for Canada; FN for other foreign jurisdiction)	2001 / 1
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).	's /\$/
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) or received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.	on the earlier of the date it is
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.	<i>y</i>
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed signatures.	
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.	d in Part C, and any material
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the enamount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed. ATTENTION	exemption, a fee in the proper
Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, the appropriate federal notice will not result in a loss of an available state exemption unless such predicated on the filing of a federal notice.	, failure to file exemption is
Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.	SEC 1073 (1.07)

D-1452047_8.DOC

			A. BASIC IDENTIF	TICATION DATA		
2.	Enter the information r	equested for the fo	ollowing:			
X X			has been organized within the to vote or dispose, or direct the	past five years; e vote or disposition of, 10% o	r more of a class o	of equity securities of the
X X				e general and managing partner	rs of partnership is	suers; and
Ch	eck Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
	ll Name (Last name first, rkcentral Capital Mana		neral Partner			
			Street, City, State, Zip Code)			
	00 West Plano Parkway					
_	eck Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	☑ General and/or Managing Partner
	l Name (Last name first,		tner of General Partner			
Bu	siness or Residence Addr	ess (Number and	Street, City, State, Zip Code)			
	00 West Plano Parkway eck Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or
CII	eck Box(es) mat Appry.	□ Fromoter	Denencial Owner	Executive Officer	□ Director	Managing Partner
	ll Name (Last name first,		d D- wide-t of Consuel De	with an of Consul Bootson		
			and President of General Pa Street, City, State, Zip Code)	irther of General Partner		
	00 West Plano Parkway					
_	eck Box(es) that Apply:	Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Ful	Name (Last name first,	if individual)		1.0		
			of General Partner of General Street, City, State, Zip Code)	al Partner		
	00 West Plano Parkway					
	eck Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Fu	ll Name (Last name first,	if individual)				
Bu	siness or Residence Addr	ess (Number and	Street, City, State, Zip Code)			
Ch	eck Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Ful	ll Name (Last name first,	if individual)				
Bu	siness or Residence Addr	ress (Number and	Street, City, State, Zip Code)			
Ch	eck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Ful	ll Name (Last name first,	if individual)				· ———
Bii	siness or Residence Add	ess (Number and	Street, City, State, Zip Code)			
u	or itsulation itali	(

						B, IN	FORM	IATIO	N ABO	UT OI	FERI	NG			
1. Ha	Answer also in Appendix, Column 2, if filing under ULOE.										Yes	No ⊠			
2. W	hat is the	e minim	ım inves	stment th	nat will t	e accep	ted from	any ind	lividual?	,			\$ 250,000.00		
3. Do	es the o	ffering p	ermit jo	int own	ership of	a single	unit:						Yes ⊠	No □	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.										<u>o</u>	L				
Full Na	me (Las	t name f	irst, if in	dividua	l)										
Busines	s or Res	idence /	Address	(Numbe	r and Sti	reet, Cit	y, State,	Zip Cod	le)					······································	
Name o	f Associ	iated Bro	oker or I	Dealer				,							
	n Which													All States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]			
(IL) [MT)	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]			
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]			
Full Na	me (Las	t name f	irst, if in	dividua	1)										
Busines	s or Res	idence /	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Coo	le)						
Name o	f Assoc	iated Bro	oker or I	Dealer			-				•				
	n Which												 		
(Check [AL]	"All Sta	ites" or ([AZ]	heck inc [AR]	dividual [CA]	States).	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	Ц	All States	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]			
(MT)	(NE)	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]			
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]			
Full Na	me (Las	t name f	irst, if in	ıdividua	l)	<u>_</u> .									
Busine	ss or Res	sidence A	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Coo	le)			- 11		• - • -	
Name o	f Assoc	iated Bro	oker or I	Dealer											
	n Which "All Sta													All States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]			
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]			
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]			
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Type of Security Aggregate Offering Price Sold 0 Debt Equity ☐ Common ☐ Preferred Convertible Securities (including warrants)..... O Partnership Interests..... \$ 46,866,890.00 46,866,890.00 Other (Specify _____)..... Total \$ 46,866,890.00 46,866,890.00 Answer also in Appendix, Column 3, if filing under ULOE Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero." Number Aggregate Dollar Amount Investors of Purchases 46,866,890.00 Accredited Investors 12 0 Non-accredited Investors 0 Total (for filings under Rule 504 only) N/A N/A Answer also in Appendix, Column 4, if filing under ULOE 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Dollar Amount Type of Type of offering Sold Security N/A N/A Rule 505..... N/A N/A Regulation A..... N/A N/A Rule 504 N/A N/A Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. 0 Transfer Agent's Fees. 0 Printing and Engraving Costs Legal Fees. 25,000 0 Accounting Fees 0 Engineering Fees

0

0

25,000

Sales Commissions (specify finder's fees separately)

Other Expenses (identify).....

Total

	C. OFFERING PRICE,	number of investors, expenses and use	OF FI	COCEED	<u> </u>	
	and total expenses furnished in response to	ate offering price given in response to Part C-Question 1 Part C-Question 4.a. This difference is the "adjusted gross			\$ <u>_</u>	46,841,890.00
5.	each of the purposes shown. If the amount	gross proceeds to the issuer used or proposed to be used for for any purpose is not known, furnish an estimate and he total of the payments listed must equal the adjusted gross to Part C-Question 4.b. above.				
			Ó Dir	rments to fficers, ectors, & ffiliates	Pay	rments To Others
	Salaries and fees		\$		\$	
	Purchase of real estate		\$	□	S	
	Purchase, rental or leasing and instal	lation of machinery and equipment	\$		\$	
	Construction or leasing of plant build	dings and facilities	\$		\$_	
	Acquisition of other businesses (incl may be used in exchange for the asso	uding the value of securities involved in this offering that ets or securities of another issuer pursuant to a merger)	\$		s	
	Repayment of indebtedness		\$		\$_	
	Working capital		\$		s _	
	Other (specify) (investments)		\$	⊠	\$	46,841,890.00
	Column Totals		\$	⊠	\$_ <u>-</u>	46,841,890.00
	Total Payments Listed (column total	s added)		\$ <u>46,</u>	841,89	0.00
		D. FEDERAL SIGNATURE				
ign	ature constitutes an undertaking by the issuer	d by the undersigned duly authorized person. If this notice is to furnish to the U.S. Securities and Exchange Commission, credited investor pursuant to paragraph (b) (2) of Rule 502.				
Iss	uer (Print or Type)	Signature Date	ıd			
Pe	trus Fund Plus, L.P.	February	<u>[]</u> , 2	007		
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)				
Da	vid Radunsky	Chief Operating Officer of Parkcentral Capital GP, LLC., g Management, L.P.	eneral p	artner of Pa	arkcen	tral Capital
		ATTENTION			-	
	Intentional misstatements or or	<u>nissions of fact constitute federal criminal violations</u>	. (See	18 U.S.C.	1001)

	······································	E. STATE SIGNATURE							
1.		presently subject to any of the disqualification provisions of such Yes X							
	See Append	ix, Column 5, for state response.							
2.	The undersigned issuer hereby undertakes (17 CFR 239.500) at such times as required	to furnish to any state administrator of any state in which this notice is filed, a notice on Form D d by state law.							
3.	The undersigned issuer hereby undertakes offerees.	to furnish to the state administrators, upon written request, information furnished by the issuer to							
4.		issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited which this notice is filed and understands that the issuer claiming the availability of this nat these conditions have been satisfied.							
	e issuer has read this notification and knows dersigned duly authorized person.	the contents to be true and has duly caused this notice to be signed on its behalf by the							
Iss	uer (Print or Type)	Signature Date							
Pet	rus Fund Plus, L.P.	February 7, 2007							
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)							
Da	avid Radunsky Chief Operating Officer of Parkcentral Capital GP, LLC., general partner of Parkcentral Capital Management, L.P.								

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3		4			5		
	non-ac investor (Pa	to sell to credited s in State at B-m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Турс	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount			
AL										
AK										
AZ				· ·						
AR										
CA		No	Limited Partnership Interests \$5,449,851.00	1	\$5,449,851.00	0	\$ 0	No		
со										
СТ										
DE										
DC										
FL				•						
GA										
ні										
ID										
IL		No	Limited Partnership Interests \$2,080,836.00	2	\$2,080,836.00	0	\$0	No		
1N							-			
1A						_				
KS										
KY										
LA										
ME										
MD										
MA								ļ <u></u>		
MI										

APPENDIX

1] :	2	3		4					
	non-acc investor (Par	to sell to credited s in State rt B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount			
MN										
MS			į							
мо										
MT										
NE										
NV										
NH										
NJ		ļ								
NM										
NY										
NC						_				
ND										
ОН										
ок	ļ									
OR										
PA	<u> </u>					-				
RI				. <u> </u>						
SC					ļ					
SD	ļ									
TN			T too to a d			-				
TX		No	Limited Partnership Interests \$39,336,203.00	9	\$39,336,203.00	0	\$0	No		
UT										
VT										
VA										

APPENDIX

1		2	3		4			5	
	Intend to sell to non-accredited investors in State (Part B- Item 1) Type of security and aggregate offering price offered in state (Part C- Item 1)				Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount		
WA									
wv						, , , , , , , , , , , , , , , , , , , ,			
WI									
WY									
PŘ									

